Image# 15970350086 PAGE 1 / 61

#### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		All Authorized				Office Use Only
NAME OF TO COMMITTEE (in full)	YPE OR PRINT ▼		mple: If typin r the lines.	g, type	12FE4M5	
American Academy of C	)phthalmolog	y Inc Politica	I Committ	ee (OPH	THPAC)	
<u> </u>						
ADDRESS (number and street)	655 Beach Street					
Check if different						
than previously reported. (ACC)	San Francisco				CA	94109
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦			STATE A	ZIP CODE ▲
C C00196246		3. IS THIS REPORT	× N	EW N) <b>OR</b>	AN (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)		May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)  X Apr 20 (M4)		un 20 (M6) ul 20 (M7)	Η.	20 (M9) Dec 20 (M12) (Non-Election Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q1)		X Apr 20 (M4)	Primary (12P)		General	
July 15 Quarterly Report (Q2)	PRF-FI		Convention (1		Special (	
October 15 Quarterly Report (Q3)				,		
January 31 Year-End Report (YE)		Election on	M = M /	D D /	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-E Report 1		General (30G	)	Runoff (3	0R) Special (30S)
Termination Report (TER)	Tiopoit i	Election on	M = M /	D   D /	Y = Y = Y = Y	in the State of
5. Covering Period 03	/ D D / Y	2015	through	03	/ B D /	2015
I certify that I have examined this	Report and to the	e best of my kno	wledge and b	elief it is tru	e, correct and	d complete.
Type or Print Name of Treasurer	Jill Boyett					
Signature of Treasurer Jill Boy	ett		[Electronically	Filed]	ate 04	13 / 2015
NOTE: Submission of false, erroneo	us, or incomplete i	nformation may su	bject the pers	on signing th	nis Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

03 03 2015 Report Covering the Period: 2015 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 209321.69 January 1, 2015 (b) Cash on Hand at 223590.35 Beginning of Reporting Period..... 121781.49 83889.90 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 307480.25 331103.18 6(a) and 6(c) for Column B)..... 79430.97 103053.90 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 228049.28 228049.28 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

I. Receipts  butions (other than loans) From: individuals/Persons Other han Political Committees ) Itemized (use Schedule A) ii) Unitemized	COLUMN A Total This Period  68413.52  15476.38  83889.90  0.00  0.00	98511.26 23270.23 121781.49 0.00
individuals/Persons Other han Political Committees ) Itemized (use Schedule A) ii) Unitemized iii) TOTAL (add     Lines 11(a)(i) and (ii)  colitical Party Committees other Political Committees such as PACs) otal Contributions (add Lines	15476.38 83889.90 0.00	23270.23
han Political Committees  ) Itemized (use Schedule A)  i) Unitemized  ii) TOTAL (add     Lines 11(a)(i) and (ii)  colitical Party Committees  other Political Committees such as PACs)  otal Contributions (add Lines	15476.38 83889.90 0.00	23270.23
i) Itemized (use Schedule A)i) Unitemizedii) TOTAL (add Lines 11(a)(i) and (ii)	15476.38 83889.90 0.00	23270.23
i) Unitemized	15476.38 83889.90 0.00	23270.23
ii) TOTAL (add Lines 11(a)(i) and (ii)	83889.90 0.00	121781.49
ii) TOTAL (add Lines 11(a)(i) and (ii)	83889.90 0.00	
Lines 11(a)(i) and (ii)  colitical Party Committees  Other Political Committees  such as PACs)  otal Contributions (add Lines	0.00	
olitical Party Committees		0.00
other Political Committees such as PACs)otal Contributions (add Lines		0.00
ouch as PACs)otal Contributions (add Lines	0.00	
otal Contributions (add Lines	0.00	
		0.00
1(a)(iii), (b), and (c)) (Carry		
	83889.90	121781.49
otals to Line 33, page 5)	83889.90	121701.40
ers From Affiliated/Other	0.00	0.00
Committees	0.00	0.00
ans Received	0.00	0.00
and Hodolvod	7	
Panaymenta Pagaiyad	0.00	0.00
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	7	
deral Candidates and Other		
al Committees	0.00	0.00
Federal Receipts		
	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	
	0.00	
rom Schedule H3)	0.00	0.00
	0.00	
vin Funds (from Schedule H5)	0.00	0.00
tal Transfers (add 19/s) === 19/s)	0.00	
tal fransfers (add 18(a) and 18(b))	0.00	0.00
	Ans Received	Repayments Received

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Operating Expenditures:  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	07.07	400.00
Expenditures(c) Total Operating Expenditures	65.97	188.90
(add 21(a)(i), (a)(ii), and (b)) ▶	65.97	188.90
Transfers to Affiliated/Other Party  Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	79000.00	102500.00
Independent Expenditures	0.00	0.00
(use Schedule E)	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	365.00	365.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	005.00	
(add Lines 28(a), (b), and (c))▶	365.00	365.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	79430.97	103053.90
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	79430.97	103053.90

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	83889.90	121781.49
1. Total Contribution Refunds (from Line 28(d))	365.00	365.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	83524.90	121416.49
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	65.97	188.90
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	65.97	188.90

Use separate schedule(s) for each category of the Detailed Summary Page

FOR L			:	PAGE	6	OF	61
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X 11	а	11b		11c	12		
13	3	14		15	16		17

or for commercial purposes, other than using the	name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Academy of Ophthalm	nology Inc Political Committee (OF	PHTHPAC)
Full Name (Last, First, Middle Initial)  A. Richard Abbott		Date of Receipt
Mailing Address 10 Koret Way K 301		03 09 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : F97C5AF3-CBA6-400E-8
San Francisco	CA 94143-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Eric Adams		Date of Receipt
Mailing Address 6315 North Center Drive Suite	230	M = M / D = D / Y = Y = Y
		03 16 2015
City	State Zip Code	Transaction ID: 99055ABB-8FD3-4EC3-9
Norfolk	VA 23502-4006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  • Patrick Aiello		Date of Receipt
Mailing Address 3363 S. 17th Ave		03 24 _ 2015 _
City	State Zip Code	Transaction ID : 25E6834A-F86A-45FC-A
Yuma	AZ 85365	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:		
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1865.00
2		
TOTAL This Period (last page this line number of	nly)	

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arate schedule(s) category of the Summary Page  (check only one)  X 11a 11b 11c 12		FO	H LINE	NU	MBER	PAGE	/ (	ノΓ	01
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13 14 15 16 17	ouninary rago		13		14	15	16		17

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)  American Academy of Ophthal	mology Inc Political Committee (O	PHTHPAC)
Full Name (Last, First, Middle Initial)  Mayssa Aziz-Toppino  Mailing Address 1804 Oakley Seaver Dr Ste E	3	Date of Receipt
City	Ctoto Zin Cada	03 26 2015
City Clermont	State Zip Code FL 34711-1925	Transaction ID : 1E66A024-D81F-4243-A
FEC ID number of contributing federal political committee.	C 347111925	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Robert Bahr  Mailing Address 44 Oarland Street		Date of Receipt
Mailing Address 41 Cooke Street		03 27 2015
City	State Zip Code	Transaction ID : 570AE4FB-2DA3-42C0-A
Providence	RI 02906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	365.00
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 4500 San Pablo Rd		03 30 2015
City	State Zip Code	Transaction ID : B21639DC-4335-4A01-8
Jacksonville	FL 32224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1365.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

		NUMBER	:	PAGE	8	OF	61
(chec	k only	one)					
X	11a	11b		11c	12		
	13	14		15	16		17

or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Academy of Ophtha	almology Inc Political Committee (C	PHTHPAC)
Full Name (Last, First, Middle Initial)  1. Chandler Berg		Date of Receipt
Mailing Address 2709 Meredyth Dr Ste 110		03 30 2015
City	State Zip Code	Transaction ID : FCAE7F2D-9376-4948-A
Albany	GA 31707-0201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Terry Bergstrom		Date of Receipt
Mailing Address 1000 Wall St Rm 649		M M / D D / Y Y Y Y
City	State Zip Code	03 24 2015
Ann Arbor	MI 48105-1986	Transaction ID : D3CDDA23-92E2-4D68-9  Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	365.00
Name of Employer	Occupation	
self	ophthalmologist	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  C. Gail Bernard		Date of Receipt
Mailing Address 2820 Mount Rushmore Rd		03 25 2015
City	State Zip Code	Transaction ID: 8FCE0FF2-5CE5-4EBB-9
Rapid City	SD 57701-5462	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
SUBTOTAL of Receipts This Page (optional)		1230.00
TOTAL This Period (last page this line numb	<u>_</u>	

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

NAME OF COMMITTEE (In Full)	the name and address of any political committee to almology Inc Political Committee (O	
Full Name (Last, First, Middle Initial) Thomas Bersani Mailing Address 3400 Vickery Rd # A	gjz · soai committoo (O	Date of Receipt
City	State Zip Code	03 25 2015 Transaction ID : 829BF893-4503-46EF-9
North Syracuse	NY 13212-4540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  3. Cagri Besirli		Date of Receipt
Mailing Address 1600 Argyle Cres		M = M / D = D / Y = Y = Y
City	State Zip Code	03 19 2015
Ann Arbor	MI 48103-2507	Transaction ID: F98DBDD4-1289-48A1-9  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)		
Steven Bodine		Date of Receipt
Mailing Address 915 Palmer Rd		03 19 _2015 _
City	State Zip Code	Transaction ID : 883FA9E6-BD76-425F-9
Bronxville	NY 10708-3304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1300.00
TOTAL This Period (last page this line numb		

		PAGE	10 OF
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		Detailed Summary Page		13	Н	14	_	15	16	17
Any information copied from such Reports and or for commercial purposes, other than using t				or the		pos	e of s	oliciting	contribu	ıtions
NAME OF COMMITTEE (In Full)										
American Academy of Ophtha	lmology In	c Political Committee (	OPH	THP 	AC	C)				
Full Name (Last, First, Middle Initial)  A. H. Culver Boldt			D	ate of	Re	ecei	pt			
Mailing Address 200 Hawkins Dr				м - м	/		27	/ Y	2015	Y
City	State	Zip Code		Trans	acti	ion	ID : C	B5244	A5-0018-	435D-9
Iowa City	IA	52242-1009	A	mount	of	Ead	ch Re	ceipt th	is Period	d
FEC ID number of contributing federal political committee.	С					7		-1	36	5.00
Name of Employer	Occupation									
Self	Ophthalmol	ogist								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General  Other (specify) ▼		365.00								
Full Name (Last, First, Middle Initial)  3. William Bridges Jr.			D	ate of	Re	ecei	pt			
Mailing Address 21 Medical Park Dr				M M	/		31	/ Y	2015	Y
City	State	Zip Code		Trans	acti	ion	ID : C	19BDA	FC-8118	-4720-9
Asheville	NC	28803-2493	A	mount	of	Ead	ch Re	ceipt th	is Period	d
FEC ID number of contributing federal political committee.	С				_	7		-1	111	1.08
Name of Employer	Occupation									
Self	Ophthalmol	ogist								
Receipt For: Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼	L	333.24	ч							
Full Name (Last, First, Middle Initial)  Donald Budenz			D	ate of	Re	ecei	pt			
Mailing Address 5151 Bioinformatics Blg, Ca CB7040			_  L	03	/	L	25		2015	
City Chapel Hill	State NC	Zip Code 27599-7040							89-823F	
FEC ID number of contributing federal political committee.	С				_	7		-,	50	0.00
Name of Employer	Occupation		$\dashv$							
Self	Ophthalmo	ogist								
Receipt For:	T -	Year-to-Date ▼	$\neg$							
Primary General	33 0 1		1							
Other (specify) ▼		500.00								
SUBTOTAL of Receipts This Page (optional)						7			976	5.08
TOTAL This Period (last page this line number	er only)		. [			,		-,		

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Jennifer Cecil Date of Receipt Mailing Address 2902 Ginnala Dr Ste 1 30 2015 City Zip Code State Transaction ID: 4057E38F-D92E-406C-8 CO Loveland 80538-7818 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Donald Cinotti Date of Receipt Mailing Address 600 Pavonia Ave Ste 6 03 15 2015 City State Zip Code Transaction ID: 538C0127-AF3F-4F85-9 NJ Jersey City 07306-2932 Amount of Each Receipt this Period FEC ID number of contributing 416.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.01 Other (specify) Full Name (Last, First, Middle Initial) c. S. William William Clark Date of Receipt Mailing Address 502 Isabella St 09 2015 City Zip Code State Transaction ID: D5C11FAB-791A-421D-8 GA Waycross 31501-3638 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1781.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) James Conahan Date of Receipt Mailing Address 9330 S University Blvd Ste 220 2015 City Zip Code State Transaction ID: 5F24BF28-4F54-49A8-8 CO Highlands Ranch 80126-5049 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brian Connolly Date of Receipt Mailing Address 28 Delancey Ct 03 25 2015 City State Zip Code Transaction ID: 14C76B37-AD85-4D82-8 NY Pittsford 14534-2700 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Croley III Date of Receipt Mailing Address 613 Del Prado Blvd 15 2015 City State Zip Code Transaction ID: D2C3C9D5-365E-4AD4-9 FL Cape Coral 33990 Amount of Each Receipt this Period FEC ID number of contributing 83.37 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.03 Other (specify) 813.37 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Hajir Dadgostar Date of Receipt Mailing Address 16500 Ventura Blvd Ste 250 2015 City Zip Code State Transaction ID: 69F3A1DE-7C01-4E6D-A CA Encino 91436-2018 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Deegan Date of Receipt Mailing Address 6354 Walker Ln Ste 100 03 04 2015 City State Zip Code Transaction ID: 19A66FB8-D8E4-45A0-9 VA Alexandria 22310-3242 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) Anna Luisa Di Lorenzo Date of Receipt Mailing Address 1393 Fairfax 17 2015 City Zip Code State Transaction ID: CC96D7EC-8A44-4DA2-A MI Birmingham 48009 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Peter Diedrichsen Date of Receipt Mailing Address PO Box 1275 2015 31 City Zip Code State Transaction ID: 3D3A6EB2-A3C3-41AC-8 ΝE Columbus 68602-1275 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Albert Edwards Date of Receipt Mailing Address 1550 Oak St Ste 4 03 18 2015 City State Zip Code Transaction ID: B530DD46-ED9F-45B7-9 OR Eugene 97401-7701 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Malcolm Edwards Date of Receipt Mailing Address 1240 Colonial Commons Ct 24 2015 City Zip Code State Transaction ID: 059A0FE9-A821-4193-9 SC Lancaster 29720-2200 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 2865.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE	15 OF	61
Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
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	and Statements may not be sold or used by any pers ng the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,	
,	halmology Inc Political Committee (C	PHTHPAC)
Full Name (Last, First, Middle Initial)  A. Randy Ennen		Date of Receipt
Mailing Address 3312 S 70th St		Mam / Dab / Yayayay
		03 24 2015
City	State Zip Code	Transaction ID : D00AC8D5-5F65-4361-9
Fort Smith	AR 72903	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	1000.00	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  Stan Feil	1	Date of Receipt
Mailing Address 112 N Akers St Ste A		M = M / D = D / Y = Y = Y
City	State Zip Code	03 31 2015
Visalia	State Zip Code CA 93291-5121	Transaction ID: D2EC6206-9C25-4372-9  Amount of Each Receipt this Period
		Aniount of Lacii necelpt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	249.99	
Full Name (Last, First, Middle Initial)  James Finegan	1	Date of Receipt
Mailing Address 236 Roseberry St		03 15 2015
City	State Zip Code	Transaction ID : 7C4ED45A-1903-4046-B
Phillipsburg	NJ 08865	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.33
Name of Employer	Occupation	-
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	499.98	
SUBTOTAL of Receipts This Page (option	nal)	1166.66
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TOTAL THIS Period (last page this line nu	mber only)	

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) James Finegan Date of Receipt Mailing Address 236 Roseberry St 2015 31 City State Zip Code Transaction ID: 0FC8979D-84F1-47F4-B Phillipsburg NJ 08865 Amount of Each Receipt this Period FEC ID number of contributing C 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) B. Joanna Fisher Date of Receipt Mailing Address 769 Fetters Mill Road 03 22 2015 City State Zip Code Transaction ID: 375B65C5-964E-4684-B PA Huntingdon Valley 19006-5109 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Christina Flaxel Date of Receipt Mailing Address PO Box 80401 03 29 2015 City Zip Code State Transaction ID: A7D4CD93-7959-4077-B OR Portland 97280 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1583.33 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Gary Foster Date of Receipt Mailing Address 1725 E Prospect Rd 2015 City State Zip Code Transaction ID: 8E0AFFF5-66A3-41BA-A CO Fort Collins 80525-1307 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth Frank Date of Receipt Mailing Address 1401 S Main St 03 18 2015 City State Zip Code Transaction ID: 422543AD-4183-4691-8 KS Ottawa 66067-3528 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Luther Fry Date of Receipt Mailing Address 310 E Walnut Street 30 2015 City State Zip Code Transaction ID: F9C7A87D-759F-445C-8 KS Garden City 67846-5560 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2365.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page	<u>&gt;</u>	<b>1</b> 1a		11b		11c		12		
,		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Sidney Gicheru Date of Receipt Mailing Address 4385 San Carlos Drive 2015 City State Zip Code Transaction ID: F7B2DC8B-312A-4895-9 75205 Dallas TX Amount of Each Receipt this Period FEC ID number of contributing 208.37 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 625.03 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Gilbert Date of Receipt Mailing Address 12301 NE 10th PI Ste 200 03 15 2015 City State Zip Code Transaction ID: 009AFAE3-F9BC-4E62-9 WA Bellevue 98005-2487 Amount of Each Receipt this Period FEC ID number of contributing 83.37 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.03 Other (specify) Full Name (Last, First, Middle Initial) c. Dana Graichen Date of Receipt Mailing Address 56 Durrells Woods Rd 31 2015 City Zip Code State Transaction ID: 6F13CD20-F726-4CA8-A MF Arundel 04046-7503 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 656.74

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Robert Gross Date of Receipt Mailing Address 8222 Douglas Ave Ste 400 2015 City Zip Code State Transaction ID: 45E477B4-15F4-45D8-A 75225-5935 Dallas TX Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Robert Grosserode Date of Receipt Mailing Address 3747 Sunset Ln 03 31 2015 City State Zip Code Transaction ID: 2B8C3AF3-C681-4B04-8 CA Antioch 94509-6101 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Grostern Date of Receipt Mailing Address 3424 N Leavitt St 24 2015 City State Zip Code Transaction ID: 04DAF138-5046-4F93-A IL Chicago 60618-6014 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1365.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Vamsi Gullapalli Date of Receipt Mailing Address 2330 Troop Dr Unit 104 2015 31 City Zip Code State Transaction ID: 865706C7-D057-45F8-8 MN Sartell 56377-4580 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Haley Date of Receipt Mailing Address 1626 Forest Ln S Ste B 03 25 2015 City State Zip Code Transaction ID: 382C1C78-2B20-4E59-8 TX Garland 75042-7943 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Lawrence Halperin Date of Receipt Mailing Address 5882 Windsor Ter 22 2015 City State Zip Code Transaction ID: DB3F433B-477C-455C-A FL Boca Raton 33496-2758 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 965.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Thomas Harbin Date of Receipt Mailing Address 3225 Cmbld Blvd SE Ste 900 2015 24 City Zip Code State Transaction ID: 8412922D-3991-44FE-B GA Atlanta 30339-5971 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Harris Jr. Date of Receipt Mailing Address 1928 Alcoa Hwy Ste 324 03 25 2015 City State Zip Code Transaction ID: 890168B5-657B-4ED9-8 TN Knoxville 37920-1505 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas Hawk Date of Receipt Mailing Address 6131 Luther Ln Ste 216 03 24 2015 City Zip Code State Transaction ID: D98076E8-1084-481C-9 **Dallas** TX 75225 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 1095.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Marnix Heersink Date of Receipt Mailing Address 2800 Ross Clark Circle SW Ste 1 2015 City Zip Code State Transaction ID: BEF26BE5-B409-4E50-A Dothan AL 36301 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sebastian Heersink Date of Receipt Mailing Address 2800 Ross Clark Cir 03 26 2015 City State Zip Code Transaction ID: 0B50504D-8EDB-46BC-8 AL Dothan 36301-2040 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kurt Heitman Date of Receipt Mailing Address 113 Doctors Dr 02 2015 Zip Code City State Transaction ID: 54D4BFD0-5C0A-4E24-A SC Greenville 29605 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Gary Hirshfield Date of Receipt Mailing Address 11 Hillside Ave 2015 20 City Zip Code State Transaction ID: 22B67B1E-EE5F-45F2-9 NY Port Washington 11050-2723 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1124.97 Other (specify) Full Name (Last, First, Middle Initial) B. John Johnson Date of Receipt Mailing Address 110 Med Tech Pkwy 03 19 2015 City State Zip Code Transaction ID: FF4D128B-91D1-49F1-9 TN Johnson City 37604-4004 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Leslie Jones Date of Receipt Mailing Address 8477 Indian Paintbrush Way 15 2015 City Zip Code State Transaction ID: 6783CCC3-538E-4E36-8 Lorton VA 22079-5610 Amount of Each Receipt this Period FEC ID number of contributing 41.63 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.65 Other (specify) 1541.63 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 24 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Leslie Jones Date of Receipt Mailing Address 8477 Indian Paintbrush Way 2015 31 City Zip Code State Transaction ID: 442FDE9E-8A4D-4C6B-8 Lorton VA 22079-5610 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 291.65 Other (specify) Full Name (Last, First, Middle Initial) B. Brian Joondeph Date of Receipt Mailing Address 8101 E Lowry Blvd Ste 210 03 31 2015 City State Zip Code Transaction ID: FFE2D34E-2F98-472B-B CO Denver 80230-7195 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Emilio Justo Date of Receipt Mailing Address 19052 R. H. Johnson Blvd 19 2015 City Zip Code State Transaction ID: EF124B6E-B602-411C-B ΑZ Sun City West 85375-4401 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 771.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmolo	ogy Inc Political Committee (	OPHTHPAC)
Tallahassee  FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  Other (specify) ▼  Age	State Zip Code FL 32308-4599  Coupation Coupat	Date of Receipt  03 22 2015  Transaction ID : A2541E23-0BBC-47F6-8  Amount of Each Receipt this Period  1000.00
Santa Rosa  FEC ID number of contributing federal political committee.  Name of Employer Self Op	State Zip Code CA 95403-3612  Coupation hthalmologist ggregate Year-to-Date ▼  250.00	Date of Receipt  03 05 2015  Transaction ID: E334FBF1-0974-48C3-A  Amount of Each Receipt this Period  250.00
Palmer  FEC ID number of contributing federal political committee.  Name of Employer  Self  Opposite For:	State Zip Code MA 01069-1215  Coupation Ohthalmologist ggregate Year-to-Date ▼  500.00	Date of Receipt  03 31 2015  Transaction ID: B0B96FCA-C3B2-45D9-8  Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional)	·	1750.00
TOTAL This Period (last page this line number only)		

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 26 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	gy Inc Political Committee (	OPHTHPAC)
Portland  FEC ID number of contributing federal political committee.  Name of Employer  Self  Oph  Receipt For:  Primary  Other (specify)   Other	ate Zip Code R 97221-1361  upation thalmologist regate Year-to-Date ▼  365.00	Date of Receipt  03 24 2015  Transaction ID: 4EAF3D9A-584D-4E58-B  Amount of Each Receipt this Period  365.00
Chicago  FEC ID number of contributing federal political committee.  Name of Employer Self Ophi	ate Zip Code 60641  upation thalmologist regate Year-to-Date ▼  365.00	Date of Receipt  03 26 2015  Transaction ID: 5303777B-2C73-4E25-A  Amount of Each Receipt this Period  365.00
Louisville  FEC ID number of contributing federal political committee.  Name of Employer  Self  Descript For:	ate Zip Code Y 40207  upation thalmologist regate Year-to-Date ▼  5000.00	Date of Receipt  M M / 24 2015  Transaction ID : F896DB7B-A271-4D01-B  Amount of Each Receipt this Period  5000.00
SUBTOTAL of Receipts This Page (optional)	·····	5730.00

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		13		14		15		16			17

	is and Statements may not be sold or used by any per using the name and address of any political committee	
NAME OF COMMITTEE (In Full)	hthalmalagy Ina Political Committee (C	
American Academy of Op	hthalmology Inc Political Committee (C	DPHTHPAC)
Full Name (Last, First, Middle Initial)  A. Kristine Kunesh-Part		Date of Receipt
Mailing Address 2601 Far Hills Ave		M = M / D = D / Y = Y = Y
City	State Zip Code	03 30 2015 Transaction ID : FFD7FEE5-CF6F-4BFC-9
Dayton	OH 45419-1634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	365.00
Name of Employer	Occupation	_
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial) <b>B.</b> Wayne Larrison		Date of Receipt
Mailing Address 46 Prince St Ste 203		03 30 2015
City	State Zip Code	Transaction ID : ACF26A46-7ED6-4769-8
New Haven	CT 06519-1600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial)  C. Roger Lash	-	Date of Receipt
Mailing Address 9 Mulberry Ln		03 25 2015
City	State Zip Code	Transaction ID : B0200E98-DD68-459A-9
White Plains	NY 10605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
		1230.00
SUBTOTAL of Receipts This Page (opti	ional)	1230.00
TOTAL This Period (last page this line	number only)	

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Detailed Summary Page	X 1	1a	11b		11c		12	ſ	
	13	3 I	114		15		16		17

	d Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Academy of Ophtha	almology Inc Political Committee (C	PHTHPAC)
Full Name (Last, First, Middle Initial)  Monte Leidenix		Date of Receipt
Mailing Address 2520 Smokey Ln		03 24 2015
City	State Zip Code	Transaction ID : 5E77C6DD-BB4D-47DA-8
Bismarck	ND 58504	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	†
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  3. Cecily Lesko		Date of Receipt
Mailing Address 1005 Clifton Ave Ste 1		03 21 2015
City	State Zip Code	Transaction ID : 0F90B009-25CF-4408-A
Clifton	NJ 07013-3561	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  Andrew Lewis	<u>'</u>	Date of Receipt
Mailing Address 102 Dawn Pl		03 15 2015
City	State Zip Code	Transaction ID : E5417FEE-DEBD-4404-8
Yorktown	VA 23693-3628	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	†
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	365.00	
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	1730.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 29 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Richard Lindstrom Date of Receipt Mailing Address 9801 DuPont Ave S Ste 200 2015 31 City Zip Code State Transaction ID: EAC1AB8F-F8F1-460F-B MN Bloomington 55431-3200 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Douglas Litchfield Date of Receipt Mailing Address 200 S 5th St 03 27 2015 City State Zip Code Transaction ID: 529B286C-A356-4DFF-9 ND **Bismarck** 58504-5675 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Samuel Lo Date of Receipt Mailing Address 1441 Kapiolani Blvd Ste 418 31 2015 City State Zip Code Transaction ID: 778B1D46-957F-47AE-A HI Honolulu 96814-4400 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 1730.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Masud Malik Date of Receipt Mailing Address 3865 N Mulford Rd 2015 31 City State Zip Code Transaction ID: 3C05E604-D60C-4030-A Rockford IL 61114-5603 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.34 Other (specify) Full Name (Last, First, Middle Initial) B. Masud Malik Date of Receipt Mailing Address 3865 N Mulford Rd 03 31 2015 City State Zip Code Transaction ID: 2CF692BE-274D-4E94-8 Rockford IL 61114-5603 Amount of Each Receipt this Period FEC ID number of contributing 83.33 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 208.34 Other (specify) Full Name (Last, First, Middle Initial) c. Nick Mamalis Date of Receipt Mailing Address 2246 Willow Hills Dr 03 04 2015 City State Zip Code Transaction ID: 683E7658-2CDD-4631-A UT Sandy 84093 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	X 11a	11b	11c	1	2
,,	13	14	15	1	6

	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Ophthal	mology Inc Political Committee (O	PHTHPAC)
Full Name (Last, First, Middle Initial)  William Maxwell  Mailing Address 1360 E Herndon Ave Ste 40	1	Date of Receipt
City Fresno FEC ID number of contributing	State Zip Code CA 93720-3326	03 31 2015  Transaction ID: C1711AE9-9C83-49B4-A  Amount of Each Receipt this Period  365.00
Receipt For:  Primary  Other (specify) ▼  Name of Employer  Self  General  General	C Occupation Ophthalmologist  Aggregate Year-to-Date ▼  365.00	303.00
Full Name (Last, First, Middle Initial)  3. Silvia McKevitt  Mailing Address 931 Yakima Ave S		Date of Receipt  03 20 2015
City Seattle  FEC ID number of contributing federal political committee.	State Zip Code WA 98144-3146	Transaction ID: 8A070407-5271-4283-B Amount of Each Receipt this Period 365.00
Name of Employer Self  Receipt For:  Primary General Other (specify) ▼	Occupation Ophthalmologist  Aggregate Year-to-Date ▼  365.00	
Full Name (Last, First, Middle Initial) Calvin Mein Mailing Address 9 Sanctuary Dr  City San Antonio	State Zip Code TX 78248	Date of Receipt  03 24 2015  Transaction ID: 11621BD2-6FEF-4ECC-B
FEC ID number of contributing federal political committee.  Name of Employer  Self  Receipt For:  Primary  General  Other (specify)	Occupation Ophthalmologist  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1230.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)									
<b>&gt;</b>	11a		11b		11c		12		
	13		14		15		16	;	17

	Statements may not be sold or used by any perso e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	. , , ,	
	nology Inc Political Committee (OF	PHTHPAC)
/		•
Full Name (Last, First, Middle Initial)  • Peter Menger		Date of Receipt
Mailing Address 7809 Myrtle Ave		<u> </u>
ag / 1003 Nigrile Ave		03 25 2015
City	State Zip Code	Transaction ID : BF44014B-EEE4-42FD-B
Glendale	NY 11385-7439	Amount of Each Receipt this Period
FEC ID number of contributing	C	500.00
federal political committee.	<u> </u>	300.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial)		
3. Sarah Merrill		Date of Receipt
Mailing Address 804 Monroe Street		M = M / D = D / Y = Y = Y
		03 19 2015
City	State Zip Code	Transaction ID: 1DC0B846-91A1-45D4-B
Herndon	VA 20170	Amount of Each Receipt this Period
FEC ID number of contributing	С	250.00
federal political committee.		7
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		
Michael Edward Edward Migliori		Date of Receipt
Mailing Address 120 Dudley St Ste 301		M M / D D / Y Y Y Y Y
City	State Zip Code	03 31 2015 Transaction ID : 904DDEFD-197C-49EE-B
Providence	RI 02905-2429	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	83.33
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	249.99	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	833.33
TOTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Richard Mills Date of Receipt Mailing Address 3714 E. Columbia St. 2015 City Zip Code State Transaction ID: CE6C52CD-8E1D-4B5D-9 WA Seattle 98122 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Minturn Date of Receipt Mailing Address 200 W 103rd St Ste 1030 03 27 2015 City State Zip Code Transaction ID: 0566AD19-DB68-410B-A IN Indianapolis 46290-1017 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. C. Blake Blake Myers Date of Receipt Mailing Address 601 Halton Rd 18 2015 City Zip Code State Transaction ID: ABB61A79-44C3-4C85-B SC Greenville 29607-3403 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1615.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Juan Carlos Nieto Date of Receipt Mailing Address 2140 John F Kennedy Rd 20 2015 City Zip Code State Transaction ID: 7BD96C9D-11BF-4F78-8 Dubuque IΑ 52002 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sara O'Connell Date of Receipt Mailing Address 7504 Antioch Rd 03 27 2015 City State Zip Code Transaction ID: 27F4332D-CDF9-40C8-9 Overland Park KS 66204-2622 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel Petashnick Date of Receipt Mailing Address 496 foote rd 24 2015 Zip Code State Transaction ID: D5A4756F-60B0-41CB-8 CT south glastonbury 06073 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Michael Peterson Date of Receipt Mailing Address 700 W Kent Ave 2015 24 City Zip Code State Transaction ID: 71B4B06A-E74C-4DFE-B MT Missoula 59801-6772 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Pollack Date of Receipt Mailing Address 300 Barney Dr Ste D 03 17 2015 City State Zip Code Transaction ID: 0DBB60BF-A999-4404-B IL Joliet 60435-5279 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Norman Radtke Date of Receipt Mailing Address 3 Audubon Plaza Dr Ste 240 03 31 2015 Zip Code City State Transaction ID: 90676358-FF25-49E8-A KY Louisville 40217-1319 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1230.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)  American Academy of Ophtha	Imology Inc Political Committee (O	PHTHPAC)
Full Name (Last, First, Middle Initial) Stephen Reck		Date of Receipt
Mailing Address 345 College St SE, Ste C		03 30 <u>Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</u>
City	State Zip Code	Transaction ID : BC5A4666-BE7E-4A97-9
Lacey	WA 98503-1014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	-
Self	Ophthalmologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  3. John Robinson		Date of Receipt
Mailing Address 501 E Macarthur St		03 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : CAE86064-C102-4260-9
Shawnee	OK 74804-2201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	1
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  C. Catherine Rommel		Date of Receipt
Mailing Address 2115 Noll Dr		03 20 _2015 _
City	State Zip Code	Transaction ID : FB6D9CA2-E73C-436D-8
Lancaster	PA 17603-7600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	+
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	Aggregate real to bate ▼	
Other (specify) ▼	365.00	
SUBTOTAL of Receipts This Page (optional).		1130.00
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for each category of the Detailed Summary Page	X 11a 1	11b 1	1c	12	
	l 🗆 13 🗀 1	14 1	5	16	

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Academy of Ophtha	Imology Inc Political Committee (O	PHTHPAC)
Full Name (Last, First, Middle Initial)  Enrica Rossi  Mailing Address 1718 N Hudson Ave		Date of Receipt
City Chicago	State Zip Code IL 60614-5611	03 16 2015  Transaction ID: F815F96C-D275-425B-A  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer  Self  Receipt For:  Primary  General	Occupation Ophthalmologist  Aggregate Year-to-Date ▼	-
Full Name (Last, First, Middle Initial)  3. Steven Safran	365.00	Date of Receipt
Mailing Address 132 Franklin Corner Rd A-1  City  Lawrenceville	State Zip Code NJ 08648	03 25 2015 Transaction ID : A0B3899D-BA64-4ED8-A
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  365.00
Name of Employer Self Receipt For:	Occupation Ophthalmologist	
Primary	Aggregate Year-to-Date ▼  365.00	
Full Name (Last, First, Middle Initial)  Stephen Schall  Mailing Address 9100 Wilshire Blvd Ste 852		Date of Receipt
City Beverly Hills	State Zip Code CA 90212-3464	03 27 2015  Transaction ID : AA1819D5-9B4C-43B4-9  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer  Self  Receipt For:  Primary General  Other (specify) ▼	Occupation Ophthalmologist  Aggregate Year-to-Date ▼  365.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1095.00
TOTAL This Period (last page this line number	r only)	

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Halsey Settle Date of Receipt Mailing Address 4207 James Casey St Ste 305 2015 24 City Zip Code State Transaction ID: 3E149202-D5DF-4F2B-9 TX Austin 78745-1193 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Shepherd Date of Receipt Mailing Address 41935 W 12 Mile Rd Ste 103 03 30 2015 City State Zip Code Transaction ID: 815CE3A4-E852-420A-A MI Novi 48377-3135 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Sherry Date of Receipt Mailing Address 2500 Grubb Rd Ste 234 17 2015 City Zip Code State Transaction ID: BD5E8B1B-9F4E-4CFF-9 DE Wilmington 19810-4796 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 980.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) R. Michael Siatkowski Date of Receipt Mailing Address 608 Stanton L Young Blvd 2015 City Zip Code State Transaction ID: 15407A79-A5AB-47FB-8 OK Oklahoma City 73104-5065 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lawrence Singerman Date of Receipt Mailing Address 3401 Enterprise Pkwy Suite 300 03 12 2015 City State Zip Code Transaction ID: B686AAAA-29A6-412D-9 Cleveland OH 44122-7340 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Harinderjit Singh Date of Receipt Mailing Address 3685 Wheeler Rd Ste 201 03 24 2015 City Zip Code State Transaction ID: B9E9659D-695E-4E8B-8 GA Augusta 30909-6440 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1365.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Coral Smith Date of Receipt Mailing Address 500 Ardath Dr 04 2015 City Zip Code State Transaction ID: ADFBDCDD-D32D-42FA-8 CA Cambria 93428-5525 Amount of Each Receipt this Period FEC ID number of contributing 199.00 federal political committee. Name of Employer Occupation self ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 398.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gerald Spindel Date of Receipt Mailing Address 6 Tsienneto Rd Ste 101 03 25 2015 City State Zip Code Transaction ID: 91F15AFA-FD56-4EE4-9 NH Derry 03038-1584 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) John Stabile Date of Receipt Mailing Address 111 Dean Dr 27 2015 City Zip Code State Transaction ID: 27E640EB-3D60-4CC5-B NJ Tenafly 07670-2764 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 1899.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Paul Sternberg Jr. Date of Receipt Mailing Address 2311 Pierce Ave 2015 City Zip Code State Transaction ID: 12B65354-28B5-4D39-A TN Nashville 37232-0025 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cameron Stone Date of Receipt Mailing Address 21 Medical Park Dr 03 15 2015 City State Zip Code Transaction ID: A4DC5084-1544-4636-B NC Asheville 28803-2493 Amount of Each Receipt this Period FEC ID number of contributing 208.37 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 625.03 Other (specify) Full Name (Last, First, Middle Initial) c. Gerald Striph Date of Receipt Mailing Address 6846 Cloister Rd 24 2015 City Zip Code State Transaction ID: BE2F5F6A-52DD-4446-9 OH Toledo 43617 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2208.37 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) John Stump Date of Receipt Mailing Address 200 Kona Cir 2015 24 City Zip Code State Transaction ID: 2A02E386-3A6D-4799-A DE Milford 19963-5396 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Su Date of Receipt Mailing Address 708 S 1st St 03 18 2015 City State Zip Code Transaction ID: 20BE1911-C0FE-4E03-B TX McAllen 78501-1123 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stephanie Sugin Date of Receipt Mailing Address 1201 W Main St Ste 100 25 2015 City State Zip Code Transaction ID: 3707D3A5-29B4-497D-B CT Waterbury 06708 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 1095.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	X 11a 11b 11c	12
	13 14 15	16 17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	· ·	
	nology Inc Political Committee (OF	PHTHPAC)
Full Name (Last, First, Middle Initial)  A. Kevin Sullivan		Date of Receipt
Mailing Address 7447 W Talcott Ave Ste 300		03 23 _ 2015 _
City	State Zip Code	Transaction ID : 595032A1-4B2F-450E-A
Chicago	IL 60631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)  Charles Sung		Date of Receipt
Mailing Address 317 N Delaware St		M = M / D = D / Y = Y = Y
City	State Zip Code	03 25 2015
Kennewick	WA 99336-7750	Transaction ID : BDE11E05-5C68-446F-8  Amount of Each Receipt this Period
FEC ID number of contributing		, another Each Heceipt this Fellou
federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  C. Steven Swedberg		Date of Receipt
Mailing Address 21827 76th Ave W Ste 102		03 24 _2015 _
City	State Zip Code	Transaction ID : 6B31E4CC-6821-4828-8
Edmonds	WA 98026-7981	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Ophthalmologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1365.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 44 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Mark Szal Date of Receipt Mailing Address 248 Pleasant St Ste 1600 2015 31 City Zip Code State Transaction ID: 9BB8778D-137F-44AD-A Concord NH 03301-7513 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gary Tanner Date of Receipt Mailing Address 10 Jacobs Ln 03 31 2015 City State Zip Code Transaction ID: EB358A78-D65D-4677-9 VA **Newport News** 23606-2815 Amount of Each Receipt this Period FEC ID number of contributing 41.67 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.02 Other (specify) Full Name (Last, First, Middle Initial) **c.** Robert Tibolt Date of Receipt Mailing Address 655 Medical Center Dr NE 20 2015 City Zip Code State Transaction ID: D62D80A2-51C3-47A0-9 OR Salem 97301-2751 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 906.67 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 45 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Sebastian Troia Date of Receipt Mailing Address 515 N 98th St 2015 City Zip Code State Transaction ID: 1DD4B01F-8955-41C6-9 ΝE Omaha 68114-2344 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Wallace Date of Receipt Mailing Address 2664 Hartford Hwy 03 31 2015 City State Zip Code Transaction ID: 4426D9F1-9097-47AD-9 AL Dothan 36305-4904 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen Waltman Date of Receipt Mailing Address 35 Frontenac Estates Dr 24 2015 City Zip Code State Transaction ID: 06BAF967-F474-4A4B-B MO St Louis 63131-2615 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1865.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: (check only one) X 11a 11b 11c

PAGE 46 OF 61 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Wayne Whitmore Date of Receipt Mailing Address 116 E 68th St 20 2015 City Zip Code State Transaction ID: 04FBFD39-B069-42CC-B NY New York 10065 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin Wienkers Date of Receipt Mailing Address PO Box 13097 03 27 2015 City State Zip Code Transaction ID: 914677B8-EEBC-4146-B WI Green Bay 54307-3097 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert Wiggins Date of Receipt Mailing Address 8 Medical Park Dr 16 2015 City Zip Code State Transaction ID: BE81C97C-6DA8-40DF-9 NC Asheville 28803-2493 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 47 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

61

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Christopher Wood Date of Receipt Mailing Address 1588 N Arlington Heights Rd 2015 City Zip Code State Transaction ID: A771188B-EAD8-4079-A Arlington Heights IL 60004-3906 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. George Wyhinny Date of Receipt Mailing Address 8901 Golf Rd Ste 206 03 27 2015 City State Zip Code Transaction ID: 7037E69E-9E2E-433B-9 Des Plaines IL 60016-6850 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lee Yasgur Date of Receipt Mailing Address 19 Robin Lake Dr 18 2015 City Zip Code State Transaction ID: EF026408-1F52-4C23-8 NJ Cherry Hill 08003-2829 Amount of Each Receipt this Period FEC ID number of contributing 365.00 С federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) 1730.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 48 OF 61 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Alyson Yashar Date of Receipt Mailing Address 21 Arrowhead Ln 2015 City Zip Code State Transaction ID: 874A858A-F0B4-418E-A Saddle River NJ 07458-2503 Amount of Each Receipt this Period FEC ID number of contributing C 365.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Niloofar Ziai Date of Receipt Mailing Address 19441 Golf Vista Plz Ste 320 03 19 2015 City State Zip Code Transaction ID: 42506B54-CD54-4264-A VA Leesburg 20176-8272 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 615.00 SUBTOTAL of Receipts This Page (optional)..... 68413.52 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		, FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only	v one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
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or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full)			
American Academy of Ophthalmo	ology Inc Political Co	mmittee (Ol	PHTHPAC)
Full Name (Last, First, Middle Initial)			
A. Ami Bera for Congress			Date of Disbursement
Mailing Address PO Box 582496			03 18 2015
City	State Zip Code		Transaction ID : B7B2DBCC38EF45CB734
Elk Grove	CA 95758		Transaction ib . B/B2DBCC30EF43CB/34
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Ameriash B. Bera		Type	1000.00
Office Sought:    House   Disburs	sement For: 2016  ✓ Primary General  Other (specify) ▼		
State: CA District: 07			
Full Name (Last, First, Middle Initial)			
B. Andy Harris for Congress			Date of Disbursement
Mailing Address PO Box 426			03 11 2015
City Stevensville	State Zip Code MD 21666		Transaction ID : 39DC32806151EA90591
Purpose of Disbursement	21000		
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Andrew P. Harris		Type	1000.00
	sement For: 2016  ✓ Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. Benishek for Congress, Inc.			Date of Disbursement
Mailing Address PO Box 108			03 11 2015
City	State Zip Code		
Gladstone	MI 49837-0108		Transaction ID: 9B5B45640F7402A9484
Purpose of Disbursement			
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Daniel J. Benishek		Туре	1000.00
Senate President	ement For: 2016 Primary General Other (specify)		
State: MI District: 01			
SUBTOTAL of Disbursements This Page (optional	)	·····•	3000.00
TOTAL This Period (last page this line number or	ıly)		

3	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 50 OF 61
т	EMIZED DISBURSEMENTS		arate schedule(s)	(check only	TOTAL CONTROL
			category of the Summary Page	21b	22 🗶 23 24 25 26
		Botanoa	- Garimary 1 ago	27	28a 28b 28c 29 30b
	ny information copied from such Reports and Statem				
or	for commercial purposes, other than using the name	ne and add	ress of any politica	al committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)				
$\rangle$	American Academy of Ophthalmolo	ogy Inc	Political Com	nmittee (OF	PHTHPAC)
<u>/_</u>	· .			` .	,
_	Full Name (Last, First, Middle Initial)				
Α.	Billy Long for Congress				Date of Disbursement
	NA 35 A 11				M M / D D / Y Y Y Y
	Mailing Address 3246 E. Ridgeview Street				03 18 2015
	City	State	Zip Code		
	-	MO	65804		Transaction ID: 33178EABBE2F4D6CEB8
	Purpose of Disbursement		00004		
	2016 Primary			011	Amount of Each Disbursement this Period
	Candidate Name			Catagony	
	William H. Long II			Category/ Type	2500.00
		ment For:	2016	712-2	, ,
	Senate	Primary	General		
	President	Other (spe	ecify) 🔻		
	State: MO District: 07				
	Full Name (Last, First, Middle Initial)				
В.	Brady for Congress				Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address PO Box 8277				03 11 2015
	,	State	Zip Code		Transaction ID: 106E97F898A533D95E9
	the Woodlands	TX	77387-8277		
	Purpose of Disbursement			011	Amount of Each Disburgement this Pariod
	Purpose of Disbursement 2016 Primary			011	Amount of Each Disbursement this Period
	Purpose of Disbursement 2016 Primary Candidate Name			Category/	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady	nent For	2016		
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Disbursem	ment For:		Category/	
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  House Senate  Disbursem	Primary	General	Category/	
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  House Senate  Disbursem		General	Category/	
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  House Senate President  State: TX District: 08	Primary	General	Category/	
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)	Primary	General	Category/	
<u></u>	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  House Senate President  State: TX District: 08	Primary	General	Category/	2500.00  Date of Disbursement
<b>C</b> .	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)	Primary	General	Category/	2500.00
<u> </u>	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress	Primary	General	Category/	Date of Disbursement
<u> </u>	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250	Primary Other (spe	General	Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
с.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City Sewburgh	Primary Other (spe	General	Category/	Date of Disbursement
с.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City Separate President  City Separate President  State: TX District: 08  City Separate President  State: TX District: 08  Separate President  State: TX District: 08  City Separate President  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250	Primary Other (spe	General cify) ▼  Zip Code	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City S  Newburgh  Purpose of Disbursement 2016 Primary	Primary Other (spe	General cify) ▼  Zip Code	Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<b>C</b> .	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City S  Newburgh  Purpose of Disbursement 2016 Primary  Candidate Name	Primary Other (spe	General cify) ▼  Zip Code	Category/ Type  011  Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City Senate President State: TX District: 08  City Senate President	Primary Other (spe	General cify) ▼  Zip Code 47629	Category/ Type	Date of Disbursement  M M J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<b>C</b> .	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX  District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City  Newburgh  Purpose of Disbursement 2016 Primary  Candidate Name  Larry Dean Bucshon  Office Sought:    House   Disbursement	Primary Other (spe	General cify) ▼  Zip Code 47629	Category/ Type  011  Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX  District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City  Newburgh  Purpose of Disbursement 2016 Primary  Candidate Name  Larry Dean Bucshon  Office Sought:  House Senate  Disbursement  Disbursement  Disbursement  Disbursement	Other (spe	General ciriy) ▼  Zip Code 47629  2016 General	Category/ Type  011  Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City Sought: Soug	Primary Other (spe	General ciriy) ▼  Zip Code 47629  2016 General	Category/ Type  011  Category/	Date of Disbursement  M M J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX  District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City  Newburgh  Purpose of Disbursement 2016 Primary  Candidate Name  Larry Dean Bucshon  Office Sought:  House Senate  Disbursement  Disbursement  Disbursement  Disbursement	Other (spe	General ciriy) ▼  Zip Code 47629  2016 General	Category/ Type  011  Category/	Date of Disbursement  M M J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City  Newburgh  Purpose of Disbursement 2016 Primary  Candidate Name  Larry Dean Bucshon  Office Sought:  House Senate President  State: IN District: 08  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Senate President  State: IN District: 08	Other (spe	General cify) ▼  Zip Code 47629  2016 General cify) ▼	Category/ Type  011  Category/ Type	Date of Disbursement  M M J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought: House Senate President  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City Sought: Soug	Other (spe	General cify) ▼  Zip Code 47629  2016 General cify) ▼	Category/ Type  011  Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Purpose of Disbursement 2016 Primary  Candidate Name  Kevin Patrick Brady  Office Sought:  State: TX District: 08  Full Name (Last, First, Middle Initial)  Bucshon for Congress  Mailing Address PO Box 250  City  Newburgh  Purpose of Disbursement 2016 Primary  Candidate Name  Larry Dean Bucshon  Office Sought:  House Senate President  State: IN District: 08  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Senate President  State: IN District: 08	Primary Other (spe	General cify) ▼  Zip Code 47629  2016 General cify) ▼	Category/ Type  011  Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 51 OF 61
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	
Any information copied from such Reports and States or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	agy Inc Political Com	omittoo (OI	
American Academy of Ophthalmolo	bgy inc Political Con	iiiiiitee (Oi	-HIHFAC)
Full Name (Last, First, Middle Initial)			Date of Disbursement
A. Cathy McMorris Rodgers for Congr	655		M M / D D / Y Y Y Y
Mailing Address Box 137			03 11 2015
	State Zip Code		Transaction ID : DFE8C5E45649B67F977
Spokane	WA 99210-0137		Transaction ID . Di E000E40040B071 077
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Cathy McMorris Rodgers		Туре	1000.00
	nent For: 2016  Primary General  Other (specify)		
State: WA District: 05			
Full Name (Last, First, Middle Initial)  B. Connolly for Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO Box 563			03 18 2015
City S Merrifield	State Zip Code VA 22116		Transaction ID: 004EC184C419DA9934C
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Gerald E. Connolly		Type	1000.00
	nent For: 2016  Primary General  Other (specify)		
Full Name (Last, First, Middle Initial)			
Democratic Congressional Campaign Committee			Date of Disbursement
Mailing Address 430 South Capitol Street, SE 2nd Floor		03 18 2015	
,	State Zip Code DC 20003		Transaction ID: 0E3B49D7E6114C659C
Purpose of Disbursement 2015 Contribution		011	
Candidate Name			Amount of Each Disbursement this Period
Democratic Congressional Campa	ign Committee	Category/ Type	15000.00
	nent For: 2015		
Senate President	Other (appoint) —		
State: District:	Other (specify) ▼ Contribution		
	Commodition		
SUBTOTAL of Disbursements This Page (optional)		·····	17000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form			, FOR LINE	NUMBER:	PAGE 52 OF 61
ITEMIZED DISBURSEMENT		separate schedule(s	(check only	one)	
		iled Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Repor	ts and Statements n	nav not he sold or i			
or for commercial purposes, other than u					
NAME OF COMMITTEE (In Full)					
American Academy of Op	hthalmology II	nc Political Co	mmittee (OI	PHTHPAC)	
Full Name (Last, First, Middle Initial)				Data of Dishaman	
A. Diane Black for Congress				Date of Disburseme	
Mailing Address PO Box 1437				03 18	2015
City	State	Zip Code		Transaction ID · E	1E7B160BF8E2EAC310
Gallatin	TN	37066-1437		Hansaction ib . F	IE/B100BF0EZEAC310
Purpose of Disbursement 2016 Primary			011	Amount of Each Dis	bursement this Period
Candidate Name			Category/		1000.00
Diane Lynn Black  Office Sought:	Disbursement Fo	nr: 2016	Туре	7	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Senate President	Y Primar				
State: TN District: 06					
Full Name (Last, First, Middle Initial)					
B. Dr. Raul Ruiz for Congres	S			Date of Disburseme	nt
Mailing Address PO Box 3433				03 18	2015
City Palm Desert	State CA	Zip Code 92261		Transaction ID : D	C81355ECF5CBC319AB
Purpose of Disbursement 2016 Primary			011	Amount of Each Dis	bursement this Period
Candidate Name Raul Ruiz			Category/ Type		1000.00
Office Sought:	Disbursement Fo	pr: 2016	21		,
Senate	Y Primar				
State: CA District: 36	Other	(specify) ▼			
Full Name (Last, First, Middle Initial)				Data of Diahuman	nt
C. Friends of Joe Heck				Date of Disburseme	
Mailing Address PO Box 750114	Mailing Address PO Box 750114			03 / 18	2015
City Las Vegas	State NV	Zip Code 89136		Transaction ID : 39	93800628E32D16A445
Purpose of Disbursement 2016 Primary	147	30100	011		
Candidate Name				Amount of Each Dis	bursement this Period
Joseph John Heck Jr.			Category/ Type		1000.00
Office Sought: House Senate President	Disbursement Fo				
State: NV District: 03					
SUBTOTAL of Disbursements This Pag	e (optional)		·····•		3000.00
TOTAL This Period (last page this line	number only)		·····•		

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Name (Last, First, Middle Initial)  A. Friends of Joe Pitts  Mailing Address PO Box 775  City State Zip Code Unionville PA 19375  Purpose of Disbursement 2016 Primary Candidate Name Joseph Russell Pitts  Office Sought: House Senate President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  Date of Disbursement  Date of Disbursement				
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Name (Last, First, Middle Initial)  A. Friends of Joe Pitts  Mailing Address PO Box 775  City Unionville Purpose of Disbursement 2016 Primary Candidate Name Joseph Russell Pitts  Office Sought:  House Senate President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  Date of Disbursement  Transaction ID: 726C4161EBFF3B4CD8  Amount of Each Disbursement this Period  Category/ Type  Disbursement For: 2016 Senate Primary General  Date of Disbursement  Date of Disbursement  Date of Disbursement	Any information copied from such Reports and Statem	ı nents may not be sold or us		
American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)  Full Name (Last, First, Middle Initial)  A. Friends of Joe Pitts  Mailing Address PO Box 775  City State Zip Code Unionville PA 19375  Purpose of Disbursement 2016 Primary  Candidate Name Joseph Russell Pitts  Office Sought: House Senate President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc				
Full Name (Last, First, Middle Initial)  A. Friends of Joe Pitts  Mailing Address PO Box 775  City State Zip Code Unionville PA 19375  Purpose of Disbursement 2016 Primary  Candidate Name Joseph Russell Pitts  Office Sought: House Senate President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc			1 1 <del></del> =	
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City State Zip Code Unionville PA 19375  Purpose of Disbursement 2016 Primary  Candidate Name  Joseph Russell Pitts  Office Sought: House Senate President President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc	A Friends of Joe Pitts			
Unionville PA 19375  Purpose of Disbursement 2016 Primary  Candidate Name  Joseph Russell Pitts  Office Sought:  House Senate President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  Transaction ID: 726C4161EBFF3B4CD8  Amount of Each Disbursement this Period  Category/ Type  Other (specify) ▼  Disbursement For: 2016  Senate Primary Other (specify) ▼  Date of Disbursement  Date of Disbursement	Mailing Address PO Box 775			
Onionville  PA 19375  Purpose of Disbursement 2016 Primary  Candidate Name  Joseph Russell Pitts  Office Sought:  Senate  President  State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  PA 19375  Amount of Each Disbursement this Period  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Disbursement For: 2016  Senate  Primary Other (specify) ▼  Date of Disbursement  Date of Disbursement				Transaction ID : 726C4161EBEE3B4CD80
2016 Primary  Candidate Name  Joseph Russell Pitts  Office Sought:  Senate President State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  Amount of Each Disbursement this Period  Category/ Type  1000.00  Amount of Each Disbursement this Period  Category/ Type  1000.00  Disbursement For: 2016  Primary Other (specify) ▼  Date of Disbursement	·	PA 19375		11alisaction ib : 72004101EBI 1 3B40B00
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Office Sought:  House				1000 00
Senate President Other (specify)  State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc		nont For: 0040	Туре	1000.00
State: PA District: 16  Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  Date of Disbursement				
Full Name (Last, First, Middle Initial)  B. Friends of Kelly Ayotte Inc  Date of Disbursement				
B. Friends of Kelly Ayotte Inc	State: PA District: 16			
M M M / D D / Y Y Y Y Y				B
	Friends of Kelly Ayotte Inc			
	Mailing Address PO Box 937			
Manchester NH 03105-0937	Manchester			Transaction ID : 65802F6CF67B2084A31
Purpose of Disbursement 2016 Primary  011 Amount of Each Disbursement this Period			011	Amount of Each Disbursement this Period
Candidate Name  Category/			Category/	4000.00
Kelly Ann Ayotte				1000.00
Office Sought: House Disbursement For: 2016				
Senate				
State: NH District:				
Full Name (Last, First, Middle Initial)				
C. Friends of Schumer  Date of Disbursement	C. Friends of Schumer			
Mailing Address 192 Lexington Avenue Suite 1001  03  11  2015	Mailing Address 192 Lexington Avenue Suite 1001			
City State Zip Code Transaction ID : 0A43AA2581777EER19	City	State Zip Code		Transaction ID : 0A43AA2581777FFB192
New York NY 10016		NY 10016		1141134CUOII ID . VA43AA2301///FFB192
Purpose of Disbursement 2016 Primary  011  Amount of Each Disbursement this Period			011	Assessment of Feeds Dick
Candidate Name	Candidate Name			Amount of Each Disbursement this Period
Charles E. Schumer  Category/ Type  1500.00	Charles E. Schumer			1500.00
Office Sought: House Disbursement For: 2016	Office Sought: House Disbursem	nent For: 2016		
Senate Primary General				
President Other (specify) ▼ State: NY District:		Other (specify) ▼		
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one)  22 X 23 24 25 26  28a 28b 28c 29 30l
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NAME OF COMMITTEE (In Full)  American Academy of Ophthalmolo	ogy Inc Political Com	mittee (OF	PHTHPAC)
Full Name (Last, First, Middle Initial)  A. Julia Brownley for Congress			Date of Disbursement
Mailing Address PO Box 2018			03 18 2015
Thousand Oaks	State Zip Code CA 91358		Transaction ID : 58463657E6C390AE982
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name Julia Brownley		Category/ Type	1000.00
Senate	nent For: 2016  Primary General  Other (specify)		
State: CA District: 26  Full Name (Last, First, Middle Initial)  B. Kirk for Senate			Date of Disbursement
Mailing Address PO Box 2594			03 18 2015
Chicago	State Zip Code IL 60690		Transaction ID : EE761767606C499FFD1
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name  Mark Steven Kirk		Category/ Type	1000.00
	nent For: 2016  Primary General  Other (specify)		
Full Name (Last, First, Middle Initial) C. Kurt Schrader for Congress			Date of Disbursement
Mailing Address PO Box 3314			03 18 2015
,	State Zip Code OR 97045		Transaction ID: 94939A344DACF909023
2016 Primary  Candidate Name	[	011 Category/	Amount of Each Disbursement this Period
	nent For: 2016 Primary General Other (specify)	Type	1000.00
SUBTOTAL of Disbursements This Page (optional)			3000.00
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SCHEDULE B (FEC Form 3X)		FOR LINE N	IUMBER: PAGE 55 OF 61
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		27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)			
American Academy of Ophthalmolo	gy Inc Political Com	mittee (OF	PHTHPAC)
Full Name (Last, First, Middle Initial)			
A. Latta for Congress			Date of Disbursement
Mailing Address PO Box 106			03 11 2015
City	tate Zip Code		Transaction ID : C55EC739661803E0660
20.1g 0.00.1	OH 43402-0106		Transaction ID . C33EC739001003E0000
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Robert E. Latta		Type	1000.00
	ent For: 2016		
	Primary General  Other (specify) ▼		
State: OH District: 05	Other (specify)		
Full Name (Last, First, Middle Initial)			
B. Lynn Jenkins for Congress			Date of Disbursement
Mailing Address PO Box 1441			03 11 2015
	7'- O-1-		
,	tate Zip Code KS 66601-1441		Transaction ID : CC72AD643E07A7658C9
Purpose of Disbursement			
2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
Lynn Michelle Jenkins		Туре	1000.00
	ent For: 2016 Primary General		
	Other (specify)		
State: KS District: 02	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial)			
<sup>C.</sup> Marsha Blackburn for Congress, In	C.		Date of Disbursement
Mailing Address PO Box 3750			03 18 2015
Mailing Address PO Box 3750			10 2013
City	tate Zip Code		Transaction ID : C3B9EA2DF270A0A3F5E
	TN 37024-3750		Transaction is . OSBSEAEST 270A0AST SE
Purpose of Disbursement 2016 Primary		011	
Candidate Name			Amount of Each Disbursement this Period
Marsha Wedgeworth Blackburn		Category/ Type	1500.00
Office Sought: House Disbursem	ent For: 2016		
	Primary General		
	Other (specify) ▼		
State: TN District: 07			
SUBTOTAL of Disbursements This Page (optional)			4000.00
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	EMIZED DISBURSEMENTS	Use separate schedule(s	) FOR LINE (check only	NOMBETT.
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$  \setminus $	NAME OF COMMITTEE (In Full)	L D I'' LO	(0	DUTUDAO)
/	American Academy of Ophthalmolo	ogy Inc Political Co	mmittee (O	PHTHPAC)
_	Full Name (Last, First, Middle Initial)			
A.	Matsui for Congress			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address PO Box 1738			03 18 2015
	City	State Zip Code		
	Sacramento	CA 95812		Transaction ID : 10A3A736211824F602A
	Purpose of Disbursement			
	2016 Primary		011	Amount of Each Disbursement this Period
	Candidate Name Doris O. Matsui		Category/	1000.00
		nent For: 2016	Туре	
		Primary General		
	President	Other (specify) ▼		
	State: CA District: 06			
	Full Name (Last, First, Middle Initial)			
В.	Michael Burgess for Congress			Date of Disbursement
	Mailing Address PO Box 2334			03 11 2015
	Walling 7 (darees - FO BOX 2554			2010
	City	State Zip Code		Transaction ID : DB10EC0AE29364DFA7A
	Denton	TX 76202-2334		Transaction is . BST0E00AE2500+STAPA
	Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
	Candidate Name			Attribute of East Propared ment and Ferred
	Michael Clifton Burgess		Category/ Type	1000.00
		nent For: 2016		
		Primary General		
		Other (specify) ▼		
_	State: TX District: 26			
C.	Full Name (Last, First, Middle Initial)  Morgan Griffith for Congress			Date of Disbursement
-	Worgan Chillin for Congress			M M / D D / Y Y Y Y
	Mailing Address PO Box 361			03 18 2015
	011	7. 0. 1		
	•	State Zip Code VA 24068		Transaction ID: 8F6C72E437580A3CE73
	Purpose of Disbursement	21000		
	2016 Primary		011	Amount of Each Disbursement this Period
	Candidate Name		Category/	5000.00
	H. Morgan Griffith	nent Ferri core	Туре	3000.00
		nent For: 2016 Primary General		
	President	Other (specify)		
	State: VA District: 09	· (-i: J) ▼		
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SCHEDULE B (FEC Form 3X)		F0D : :::-	NUMBER: PAGE 57 OF 61		
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II LIVIIZED DISBURSEIVIEN IS	for each category of the	21b	22 🔀 23 24 25 26		
	Detailed Summary Page	27	28a 28b 28c 29 30b		
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NAME OF COMMITTEE (In Full)					
$ \; angle$ American Academy of Ophthalmo	ology Inc Political Co	mmittee (O	PHTHPAC)		
Full Name (Last, First, Middle Initial)		1			
A. New Democrat Coalition PAC			Date of Disbursement		
		M M / D D / Y Y Y			
Mailing Address 700 13th Street, NW			03 18 2015		
Suite 600	State 7in Code				
City Washington	City State Zip Code Washington DC 20005				
Purpose of Disbursement	20000				
2015 Contribution		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	5000.00		
New Democrat Coalition PAC		Туре	5000.00		
	sement For: 2015				
Senate President	Primary General				
State: District:	Other (specify)	1			
Full Name (Last, First, Middle Initial)	2324101				
B. NRCC			Date of Disbursement		
	M = M / D = D / Y = Y = Y				
Mailing Address 320 First Street SE	ailing Address 320 First Street SE				
City					
City Washington	State Zip Code DC 20003		Transaction ID: 631A950F26992444137		
Purpose of Disbursement	20000				
2015 Contribution		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	15000.00		
NRCC	. =	Type	13000.00		
	sement For: 2015				
Senate President	Primary General  Other (specify)				
State: District:		n			
Full Name (Last, First, Middle Initial)					
C. Pallone for Congress	Date of Disbursement				
		M M / D D / Y Y Y			
Mailing Address PO Box 3176			03 11 2015		
City	State Zip Code				
Long Branch	NJ 07740		Transaction ID : BF242664BCFCD77BF76		
Purpose of Disbursement					
2016 Primary		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	1000.00		
Frank Pallone Jr.	noment For: 2012	Туре	1000.00		
Office Sought: House Disburs	sement For: 2016  Primary General				
President	Other (specify)				
State: NJ District: 06					
SUBTOTAL of Disbursements This Page (optional	)		21000.00		
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SCHEDULE B (FEC Form 3X)	11	, FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	Collective 21h	7 one)  22 X 23 24 25 26 28a 28b 28c 29 30
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NAME OF COMMITTEE (In Full)  American Academy of Ophthalmo	logy Inc Political Co	ommittee (OI	PHTHPAC)
Full Name (Last, First, Middle Initial)			
Renee Ellmers for Congress Committee			Date of Disbursement
Mailing Address PO Box 99567			03 18 2015
City	State Zip Code		Transaction ID : 140FD0F59D8DA86A920
Raleigh	NC 27624		Transaction ib . 1401 bot 39bobbook320
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Renee L. Ellmers		Туре	2500.00
Office Sought: House Disburse Senate President	ement For: 2016 Primary General Other (specify)		
State: NC District: 02			
Full Name (Last, First, Middle Initial)  B. Ryan Costello for Congress	,		
Mailing Address PO Box 3154			03 18 2015
00			
City West Chester	State Zip Code PA 19381		Transaction ID : EB24C786E5921A08A84
Purpose of Disbursement 2016 Primary	10001	011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispursement this Period
Ryan A. Costello		Category/ Type	1000.00
Office Sought: House Disburse	ement For: 2016  ☐ Primary ☐ General  ☐ Other (specify) ▼	71	
Full Name (Last, First, Middle Initial)  C. Ryan for Congress, Inc.		Date of Disbursement	
Mailing Address PO Box 1488			03 18 2015
City Janesville	State Zip Code WI 53547-1488		Transaction ID: 8408D63E9E9514593CE
Purpose of Disbursement 2016 Primary		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Disbursement this Period
Paul Davis Ryan Jr.		Category/ Type	2500.00
Office Sought:  House Senate President State: WI District: 01	ement For: 2016 Primary General Other (specify)		
-			6000 00
SUBTOTAL of Disbursements This Page (optional)		·····•	6000.00
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IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(check on	y one)	<b>X</b> 23	24	25	<u> </u>
		Detailed	Summary Page	27	28a	28b	28c	29	30b
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	for commercial purposes, other than using the name								
	NAME OF COMMITTEE (In Full)		D 1111 1 2	.,,	. D. 1 <del></del>	24.01			
	American Academy of Ophthalmolo	gy Inc	Political Cor	nmittee (C	PHTHF	PAC)			
_	Full Name (Last, First, Middle Initial)				_				
Α.	The Richard Burr Committee					of Disbursem			
	Mailing Address Post Office Box 5928			03 11 2015  Transaction ID : A2BD005658E2FCD3C1B			Y		
	City	State Zip Code					D2C1D		
	Winston-Salem	NC	27113		Iran	saction id :	AZBD0036	30EZFU	DSCIB
	Purpose of Disbursement 2016 Primary			011	Amour	nt of Each D	isbursemer	nt this P	eriod
	Candidate Name			Category/				1000.	00
	Richard M. Burr	ant Fr	0010	Туре		7	7	1000.	00
		nent For: Primary	2016 General						
		Other (spe							
	State: NC District:		,						
_	Full Name (Last, First, Middle Initial)								
B.	Tim Murphy for Congress	for Congress				of Disbursem		/   / -	V
	Mailing Address PO Box 24551				03 18 2015			Y	
	Pttsburgh	State PA	Zip Code 15234		Tran	saction ID :	6D3071180	)5607B(	)72C7
	Purpose of Disbursement 2016 Primary			011	Amour	nt of Each D	isbursemer	nt this P	eriod
	Candidate Name			Category/				4000	00
	Timothy Francis Murphy		Туре			7	1000.	.00	
	Senate	nent For: Primary	General						
	State: PA District: 18	Other (spe	y) <b>▼</b>						
_	Full Name (Last, First, Middle Initial)				F :	( D:-!-			
Ċ.	C. Upton for All of Us					of Disbursem			V
	Mailing Address PO Box 490			03	18		2015	Υ	
		State	Zip Code		Tran	saction ID :	90C1C14E	24F427	97485
	St. Joseph Purpose of Disbursement	MI	49085		-				
	2016 Primary			011	Amour	nt of Each D	isbursemer	nt this P	eriod
	Candidate Name Category/						1000.	00	
	Fredrick Stephen Upton	ant Fr	0010	Туре			- 7	1000.	00
	Senate President	nent For: Primary Other (spe	General						
_	State: MI District: 06								
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 60 OF 61
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Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-				
NAME OF COMMITTEE (In Full)  American Academy of Ophthalmology	•			
Full Name (Last, First, Middle Initial)  A. Voice for Freedom			Date of Disburseme	ent
Mailing Address 2700 Cumberland Parkway, Suite 1				2015
City				
Atlanta	Ga Zip Code GA 30339		Transaction ID : D	DC001852E8A4B74DCA9
Purpose of Disbursement 2015 Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name Voice for Freedom		Category/		1500.00
Office Sought: House Disbursem Senate	nent For: 2015  Primary General  Other (specify)  Contribution	Туре		
Full Name (Last, First, Middle Initial)				
B. Walden for Congress		Date of Disburseme	ent	
Mailing Address PO Box 1091			03 18 2015	2015
,	State Zip Code OR 97031-0037		Transaction ID: 9	97C01887D58F1D21F33
2016 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name Gregory Paul Walden		Category/ Type		1000.00
Office Sought: House Disbursem	nent For: 2016 Primary General Other (specify)	1,500		
Full Name (Last, First, Middle Initial)  C.			Date of Disburseme	ent
Mailing Address			M M / D D	/ Y   Y   Y   Y
City	State Zip Code			
Purpose of Disbursement	Assessment of Facility Di	alama and Milia Davia d		
Candidate Name  Category/ Type				sbursement this Period
	nent For: Primary General Other (specify) ▼			,
SUBTOTAL of Disbursements This Page (optional)				2500.00
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 61 OF 61		
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or for commercial purposes, other than using the name	ne and address of any politic	al committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
American Academy of Ophthalmolo	ogy Inc Political Con	nmittee (Ol	PHTHPAC)		
/ Full Name (Last, First, Middle Initial)		İ			
A. Ranjan Malhotra			Date of Disbursement		
Ranjan Manotia			M M / D D / Y Y Y Y		
Mailing Address 12990 Manchester Rd Ste 200			03 04 2015		
Ste 200	7.0.1				
,	State Zip Code MO 63131-1860		Transaction ID: E304ABC16AEA9A1973A		
Purpose of Disbursement	03131-1000				
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Candidate Name		Category/			
		Type	365.00		
Office Sought: House Disbursen					
	Primary General				
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement		
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Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
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Candidate Name Cate					
		Type			
Office Sought: House Disbursen					
	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C.			Date of Disbursement		
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Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
	Amount of Each Disbursement this Period				
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